



**NEWS**

# 47 studies confirm ineffectiveness of masks for COVID and 32 more confirm their negative health effects

Young children being forced to wear masks is of particular concern.



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LifeSiteNews staff

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July 23, 2021 ([LifeSiteNews](#)) – Prior to facemask mandates as an alleged preventive for Covid infection and transmission, such masks were infrequently worn in hospitals and other medical facilities. They were only used in operating theatres or for visiting seriously ill patients in order to prevent infection from spit or droplets into open wounds or to partially protect visitors from acquiring and transmitting pathogens more dangerous than Covid. Many doctors and nurses have told LifeSite that for decades, if not longer, staff wearing medical masks were an uncommon sight in health care facilities other than as mentioned.

No studies were needed to justify this practice since most understood viruses were far too small to be stopped by the wearing of most masks, other than sophisticated ones designed for that task and which were too costly and complicated for the general public to properly wear and keep changing or cleaning. It was also understood that long mask wearing was unhealthy for wearers for common sense and basic science reasons.

There has been an international flood of lies about mask wearing in order to justify the bizarre and disturbing situation we have today of almost everyone wearing masks in many regions, inside and outside healthcare facilities, in schools with children of all ages, during sports events, in churches, in grocery stores and all commercial facilities, while driving and walking, and long after peak infection has passed.

It has also continued long after it was discovered that Covid was not nearly as dangerous as we were led to believe, that many of the mitigation policies caused serious damage of all kinds, including many deaths, and long after prevention and treatment protocols were discovered and used with great success, and the very best ones often criminally suppressed by government and health authorities.

The unnecessary and greatly exaggerated fear during the first few months of this pandemic, which would never have been labeled a pandemic until the WHO unilaterally changed the pandemic definition to include much less dangerous pathogens, has been manipulated to continue to this day, unlike past experiences with similar virus outbreaks. There have been numerous lies fed to the public by the WHO, national and regional government leaders and health bureaucrats and the media and many other institutions – all certainly for the purpose of maintaining fear until the large majority of the public has been injected with the poorly tested, unnecessary and dangerous Covid vaccines for which we have no evidence of their long-term safety.

President Joe Biden has been consistently presenting numerous, outrageous lies to justify his extreme Covid and vaccine policies and Paul Elias Alexander, Ph.D, has written [an article](#) published on LifeSite today that summarizes all of the most prominent and damaging lies that have generated continuing fear and caused a large percentage of Americans and citizens of other nations to accept the Covid vaccines in order to allegedly be able to return to a normal life. Included in Alexander's list are the lies related to mask mandates.

An acquaintance of Paul Alexander has written the list below of 47 studies confirming that masks are useless in preventing Covid infection and transmission and a second list further down of 32 studies confirming the negative health effects caused by frequent mask wearing, especially for young children. This has been a growing, serious concern in recent months as the dangerous health and emotional effects, especially on children, who are at almost zero risk of Covid harm, are becoming more pronounced and deeply worrisome.

## **VARIOUS FACE MASK STUDIES PROVE THEIR INEFFECTIVENESS**

### **1. Surgical mask / cloth face mask studies**

#### **Community and Close Contact Exposures Associated with COVID-19 Among Symptomatic Adults ≥18 Years in 11 Outpatient Health Care Facilities — United States, July 2020**

The US Centre for Disease Control performed a study which showed that 85 percent of those who contracted Covid-19 during July 2020 were mask wearers. Just 3.9 percent of the study participants never wore a mask.

Original: <https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6936a5-H.pdf>

Erratum. correction: [https://www.cdc.gov/mmwr/volumes/69/wr/mm6938a7.htm?s\\_cid=mm6938a7\\_w](https://www.cdc.gov/mmwr/volumes/69/wr/mm6938a7.htm?s_cid=mm6938a7_w)

<https://www.theblaze.com/op-ed/horowitz-cdc-study-covid-masks>

### **2. Facial protection for healthcare workers during pandemics: a scoping review**

This study used 5462 peer-reviewed articles and 41 grey literature records.

“Conclusion: The COVID-19 pandemic has led to critical shortages of medical-grade PPE. Alternative forms of facial protection offer inferior protection. More robust evidence is required on different types of medical-grade facial protection. As research on COVID-19 advances, investigators should continue to examine the impact on alternatives of medical-grade facial protection”

So how is your cloth and surgical mask working again if EVEN medical grade alternatives are failing ?

Study Article: <https://pubmed.ncbi.nlm.nih.gov/32371574/>

### **3. Physical interventions to interrupt or reduce the spread of respiratory viruses**

“There is moderate certainty evidence that wearing a mask probably makes little or no difference to the outcome of laboratory-confirmed influenza compared to not wearing a mask”

Study article: <https://pubmed.ncbi.nlm.nih.gov/33215698/>

#### **4. Disposable surgical face masks for preventing surgical wound infection in clean surgery**

“We included three trials, involving a total of 2106 participants. There was no statistically significant difference in infection rates between the masked and unmasked group in any of the trials”

Study article: <https://pubmed.ncbi.nlm.nih.gov/27115326/>

#### **5. Disposable surgical face masks: a systematic review**

Two randomized controlled trials were included involving a total of 1453 patients. In a small trial there was a trend towards masks being associated with fewer infections, whereas in a large trial there was no difference in infection rates between the masked and unmasked group.

Study article: <https://pubmed.ncbi.nlm.nih.gov/16295987/>

#### **6. Evaluating the efficacy of cloth facemasks in reducing particulate matter exposure**

“Our results suggest that cloth masks are only marginally beneficial in protecting individuals from particles < 2.5 µm”

Study article: <https://pubmed.ncbi.nlm.nih.gov/27531371/>

#### **7. Face seal leakage of half masks and surgical masks**

“The filtration efficiency of the filter materials was good, over 95%, for particles above 5 micron in diameter but great variation existed for smaller particles.

Coronavirus is 0.125 microns. therefore these masks wouldn't protect you from the virus”

Study article: <https://pubmed.ncbi.nlm.nih.gov/4014006/>

#### **8. Comparison of the Filter Efficiency of Medical Nonwoven Fabrics against Three Different Microbe Aerosols**

“The filter efficiencies against influenza virus particles were the lowest”

“We conclude that the filter efficiency test using the phi-X174 phage aerosol may overestimate the protective performance of nonwoven fabrics with filter structure compared to that against real pathogens such as the influenza virus”

Study article: <https://pubmed.ncbi.nlm.nih.gov/29910210/>

## **9. Aerosol penetration through surgical masks**

“Although surgical mask media may be adequate to remove bacteria exhaled or expelled by health care workers, they may not be sufficient to remove the submicrometer-size aerosols containing pathogens ”

Study article: <https://pubmed.ncbi.nlm.nih.gov/1524265/>

## **10. Particle removal from air by face masks made from Sterilization Wraps: Effectiveness and Reusability**

“We found that 60 GSM face mask had particle capture efficiency of 94% for total particles greater than 0.3 microns”

How big is the virus again? 0.125 microns.

Study article: <https://pubmed.ncbi.nlm.nih.gov/33052962/>

## **11. A New Method for Testing Filtration Efficiency of Mask Materials Under Sneeze-like Pressure**

This study states that “alternatives” like silk and gauze etc could possibly be good options in the pandemic. It’s done on starch particles.

Does not state how big they are either, but they can still get through the material and my research points out that starch particles are “big”, much bigger than most viruses.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32503823/>

## **12. Protecting staff against airborne viral particles: in vivo efficiency of laser masks**

“The laser mask provided significantly less protection than the FFP2 respirator ( $P=0.02$ ), and only marginally more protection than the surgical mask. The continued use of laser masks for respiratory protection is questionable. Taping masks to the face only provided a small improvement in protection”

Study article: <https://pubmed.ncbi.nlm.nih.gov/16920222/>

### **13. Quantitative Method for Comparative Assessment of Particle Removal Efficiency of Fabric Masks as Alternatives to Standard Surgical Masks for PPE**

“Worn as designed, both commercial surgical masks and cloth masks had widely varying effectiveness (53 – 75 percent and 28 – 91 percent particle removal efficiency, respectively)”. Different brand, different results and only when they applied “nylon layers” did the “efficiency” improve. Synthetic fibres do not breathe, so this will inevitably effect your breathing.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32838296/>

### **14. The efficacy of standard surgical face masks: an investigation using “tracer particles”**

“Since the microspheres were not identified on the exterior of these face masks, they must have escaped around the mask edges and found their way into the wound”. Human albumin cells, aka aborted fetal tissue, is much larger than the virus and still escaped the mask.

Study article: <https://pubmed.ncbi.nlm.nih.gov/7379387/>

### **15. Testing the efficacy of homemade masks: would they protect in an influenza pandemic?**

“Our findings suggest that a homemade mask should only be considered as a last resort to prevent droplet transmission from infected individuals” so why has the government suggested you make your own when they are not effective ?

Study article: <https://pubmed.ncbi.nlm.nih.gov/24229526/>

### **16. Using half-facepiece respirators for H1N1**

“Increasing the filtration level of a particle respirator does not increase the respirator’s ability to reduce a user’s exposure to contaminants”

<https://pubmed.ncbi.nlm.nih.gov/19927872/>

## **17. Why Masks Don't Work Against COVID-19**

The site is full of studies proving masks dont work for coronavirus or the flu.

Article: [https://www.citizensforfreespeech.org/why\\_masks\\_don\\_t\\_work\\_against\\_covid\\_19?fbclid=IwARoQviyvt6BObOgaMijO3CjofgTcm\\_gm5jhXcMkO8GcH3Kur-bwiboo8rf8](https://www.citizensforfreespeech.org/why_masks_don_t_work_against_covid_19?fbclid=IwARoQviyvt6BObOgaMijO3CjofgTcm_gm5jhXcMkO8GcH3Kur-bwiboo8rf8)

## **18. Masks Don't Work: A Review of Science Relevant to COVID-19 Social Policy**

This is full of studies proving mask protection is negligible for coronavirus, flu etc.

Article: [https://www.rcreader.com/commentary/masks-dont-work-covid-a-review-of-science-relevant-to-covide-19-social-policy?fbclid=IwARoQviyvt6BObOgaMijO3CjofgTcm\\_gm5jhXcMkO8GcH3Kur-bwiboo8rf8](https://www.rcreader.com/commentary/masks-dont-work-covid-a-review-of-science-relevant-to-covide-19-social-policy?fbclid=IwARoQviyvt6BObOgaMijO3CjofgTcm_gm5jhXcMkO8GcH3Kur-bwiboo8rf8)

## **19. Face masks to prevent transmission of influenza virus: a systematic review**

There is less data to support the use of face masks or respirators to prevent becoming infected.

Study article: <https://pubmed.ncbi.nlm.nih.gov/20092668/>

## **20. “Exercise with facemask; Are we handling a devil’s sword?” – A physiological hypothesis**

No evidence to suggest that wearing a mask during exercise offers any benefit from the droplet transfer from the virus.

“Exercising with facemasks may reduce available Oxygen and increase air trapping preventing substantial carbon dioxide exchange. The hypercapnic hypoxia may potentially increase acidic environment,cardiac overload, anaerobic metabolism and renal overload, which may substantially aggravate the underlying pathology of established chronic diseases”

Study article: <https://pubmed.ncbi.nlm.nih.gov/32590322/>

## **21. Use of face masks by non-scrubbed operating room staff: a randomized controlled trial**

Surgical site infection rates did not increase when non-scrubbed personnel did not wear face masks.

2010 Study article: <https://pubmed.ncbi.nlm.nih.gov/20575920/>

## **22. Surgical face masks in modern operating rooms – a costly and unnecessary ritual?**

When the wearing of face masks by non-scrubbed staff working in an operating room with forced ventilation seems to be unnecessary.

Study article: <https://pubmed.ncbi.nlm.nih.gov/1680906/>

## **23. Masks: a ward investigation and review of the literature**

Wearing multi layer operating room masks for every visit had no effect on nose and throat carriage rates.

Study article: <https://pubmed.ncbi.nlm.nih.gov/2873176/>

## **24. Aerosol penetration and leakage characteristics of masks used in the health care industry**

The protection provided by surgical masks may be insufficient in environments containing potentially hazardous submicrometer-sized aerosols.

“Conclusion: We conclude that the protection provided by surgical masks may be insufficient in environments containing potentially hazardous submicrometer-sized aerosols”

Study article: <https://pubmed.ncbi.nlm.nih.gov/8239046/>

## **25. Masks for prevention of viral respiratory infections among health care workers and the public: PEER umbrella systematic review**

Meta analysis review that says there is limited evidence to suggest that the use of masks may reduce the risk of spreading viral respiratory infections.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32675098/>

## **26. Modeling of the Transmission of Coronaviruses, Measles Virus, Influenza Virus, *Mycobacterium tuberculosis*, and *Legionella pneumophila* in Dental Clinics**

Evidence to suggest that transmission probability is strongly driven by indoor air quality, followed by patient effectiveness and the least by respiratory protection via mask use.

So this could explain “second waves” and has nothing to do with hand shaking, or not wearing a mask.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32614681/>

## **27. Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings-Personal Protective and Environmental Measures**

The use of face masks, either by infected or non infected peresons, does not have a significant effect on influenza transmission.

SO MASKS DON'T PROTECT YOU FROM ME, AND VICE VERSA.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32027586/>

## **28. Effectiveness of personal protective measures in reducing pandemic influenza transmission: A systematic review and meta-analysis**

Meta analyses suggest that regular hand hygiene provided a significant protective effect over face masks and their insignificant protection.

Study article: <https://pubmed.ncbi.nlm.nih.gov/28487207/>

## **29. Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta- analysis**

Use of n95 respirators compared to surgical masks is not associated with a lower risk of laboratory confirmed influenza.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32167245/>

### **30. Adolescents' face mask usage and contact transmission in novel Coronavirus**

Face mask surfaces can become contamination sources. People are storing them in their pockets, bags, putting them on tables, people are reusing them etc. This is why this study is relevant:

Study article: <https://pubmed.ncbi.nlm.nih.gov/32582579/>

### **31. Visualizing the effectiveness of face masks in obstructing respiratory jets**

Loosely folded face masks and “bandana style” face coverings provide minimum stopping capability for the smallest aerosolized droplets.

This applies to anyone who folds or shoves a mask into their pockets or bag. It also applies to cloth and homemade cloth masks:

Study article: <https://pubmed.ncbi.nlm.nih.gov/32624649/>

### **32. Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: a randomized controlled trial**

Face mask use in healthcare workers has not been demonstrated to provide benefit in terms of colds symptoms or getting colds.

Study article: <https://pubmed.ncbi.nlm.nih.gov/19216002/>

### **33. A cluster randomised trial of cloth masks compared with medical masks in healthcare workers**

Penetration of cloth masks by influenza particles was almost 97 percent and medical masks 44 percent. so cloth masks are essentially useless, and “medical grade” masks don’t provide adequate protection.

Study article: <https://pubmed.ncbi.nlm.nih.gov/25903751/>

### **34. Simple respiratory protection—evaluation of the filtration performance of cloth masks and common fabric materials against 20-1000 nm size particles**

Cloth masks and other fabric materials tested in the study had 40-90 percent instantaneous penetration levels against polydisperse NaCl aerosols.

“Results obtained in the study show that common fabric materials may provide marginal protection against nanoparticles, including those in the size ranges of virus-containing particles in exhaled breath”

Study article: <https://pubmed.ncbi.nlm.nih.gov/20584862/>

### **35. Respiratory performance offered by N95 respirators and surgical masks: human subject evaluation with NaCl aerosol representing bacterial and viral particle size range**

“The study indicates that N95 filtering facepiece respirators may not achieve the expected protection level against bacteria and viruses”

Study article: <https://pubmed.ncbi.nlm.nih.gov/18326870/>

### **36. Do N95 respirators provide 95% protection level against airborne viruses, and how adequate are surgical masks?**

The n95 filtering respirators may not provide expected protection level against small virions

Study article: <https://pubmed.ncbi.nlm.nih.gov/16490606/>

### **37. Do Surgical Masks Stop the Coronavirus?**

Study article: <https://slate.com/news-and-politics/2020/01/coronavirus-surgical-masks-china.html>

### **38. Effectiveness of personal protective measures in reducing pandemic influenza transmission: A systematic review and meta-analysis**

This study states that an N95, depending on the brand, can range from 0.1-0.3 microns. however, most people cannot buy an N95 with a micron smaller than 0.3 micron because they are expensive and not readily available on the public market.

“N95 respirators made by different companies were found to have different filtration efficiencies for the most penetrating particle size (0.1 to 0.3 micron)”

“Above the most penetrating particle size the filtration efficiency increases with size; it reaches approximately 99.5% or higher at about 0.75 micron”

“Meta-analyses suggest that regular hand hygiene provided a significant protective effect (OR=0.62; 95% CI 0.52-0.73; I<sup>2</sup>=0%), and facemask use provided a non-significant protective effect (OR=0.53; 95% CI 0.16-1.71; I<sup>2</sup>=48%) against 2009 pandemic influenza infection”

Study article: <https://pubmed.ncbi.nlm.nih.gov/28487207/>

### **39. Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta- analysis**

“The use of N95 respirators compared with surgical masks is not associated with a lower risk of laboratory- confirmed influenza. It suggests that N95 respirators should not be recommended for the general public or non high-risk medical staff who are not in close contact with influenza patients or suspected patients”

N95 masks did show a positive effect for BACTERIA but not viruses.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32167245/>

### **40. Adolescents’ face mask usage and contact transmission in novel Coronavirus**

This study used dye to show if masks were contaminated. “As a result, masks surface becomes a contamination source. In the contact experiment, ten adults were requested to put on and off a surgical mask while doing a word processing task. The extended contamination areas were recorded and identified by image analysis”

Study article: <https://pubmed.ncbi.nlm.nih.gov/32582579/>

### **41. Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: a randomized controlled trial**

“Of the 8 symptoms recorded daily, subjects in the mask group were significantly more likely to experience headache during the study period”

“Face mask use in health care workers has not been demonstrated to provide benefit in terms of cold symptoms or getting colds”

Study article: <https://pubmed.ncbi.nlm.nih.gov/19216002/>

## **42. Effectiveness of Adding a Mask Recommendation to Other Public Health Measures to Prevent SARS CoV-2 Infection in Danish Mask Wearers : A Randomized Controlled Trial**

“The recommendation to wear surgical masks to supplement other public health measures did not reduce the SARS-CoV-2 infection rate among wearers by more than 50 percent in a community with modest infection rates, some degree of social distancing, and uncommon general mask use”

Study article: <https://pubmed.ncbi.nlm.nih.gov/33205991/>

## **43. A cluster randomised trial of cloth masks compared with medical masks in healthcare workers**

“An analysis of mask use showed ILI (RR=6.64, 95 percent CI 1.45 to 28.65) and laboratory-confirmed virus (RR=1.72, 95 percent CI 1.01 to 2.94) were significantly higher in the cloth masks group compared with the medical masks group. Penetration of cloth masks by particles was almost 97 percent and medical masks 44 percent”

Study article: <https://pubmed.ncbi.nlm.nih.gov/25903751/>

## **44. Respiratory performance offered by N95 respirators and surgical masks: human subject evaluation with NaCl aerosol representing bacterial and viral particle size range**

“The study indicates that N95 filtering facepiece respirators may not achieve the expected protection level against bacteria and viruses. An exhalation valve on the N95 respirator does not affect the respiratory protection”

Study article: <https://pubmed.ncbi.nlm.nih.gov/18326870/>

## **45. Performance of N95 respirators: filtration efficiency for airborne microbial and inert particles**

Coronavirus is 0.125 micron, as you can read in this study, it states that most N95 masks can only filter particles as small as 0.75 microns. This is too big to trap this virus. that is a fact.

And even with an efficiency of 95 percent (depending on brand, so filtration may be lower) IF the virus can be trapped... it's still missing 5 percent and maybe more based on an N95 that has 0.1 microns .

Study article: <https://pubmed.ncbi.nlm.nih.gov/9487666/>

CORONAVIRUSES ARE 0.125 MICRON. SO THE BEST N95 ON THE MARKET WOULD DO NOTHING .

## **46. A Novel Coronavirus from Patients with Pneumonia in China, 2019**

A chinese study that proves that an airborne coronavirus particle (0.125 micron) can pass directly through an n95 mask

Study article: <https://pubmed.ncbi.nlm.nih.gov/31978945/>

## **47. Airborne coronavirus particle (<0.125 micron) will pass directly through a N95 face mask.**

Study article: <https://www.greenmedinfo.com/article/airborne-coronavirus-particle>

SIZE OF THE CORONAVIRUS: Size can vary but all are smaller than 0.3 micron .

“Human coronaviruses measure between 0.1 and 0.2 microns, which is one to two times below the cutoff” This “cut off” is referring to the size an N95 mask can trap. Most of us, are not using MEDICAL or regular N95s.

## **FACE MASK SIDE EFFECTS AND HEALTH IMPLICATIONS**

### **1. Preliminary report on surgical mask induced deoxygenation during major surgery**

Face mask side effects include lowered oxygen levels.

This study proved that surgeons that wore a mask in surgery for an hour + had significant reductions in blood oxygen saturation.

This is relevant because most of us are being made to wear face masks at work for the whole shift, long journeys on public transport, and when we are in a public places doing shopping etc. and this requires a degree of exertion that is not taken into account.

“Considering our findings, pulse rates of the surgeon’s increase and SpO2 decrease after the first hour.”

Decreasing oxygen and increasing carbon dioxide in the bloodstream stimulates a compensatory response in the respiratory centers of the brain. These changes in blood gases result in increases in both frequency and depth of breaths. This exposes another risk – if your mask traps some virus you are breathing more hence increasing viral load and exposure.

<https://www.sciencedirect.com/science/article/abs/pii/S1130147308702355?via%3Dihub>

Study article: <https://pubmed.ncbi.nlm.nih.gov/18500410/>

## **2. Impact of structural features on dynamic breathing resistance of healthcare face mask**

Face mask side effects include impeded breathing.

Ask people if they have issues breathing in these masks. anecdotal or not, as everyone is different.

“The results showed that each evaluation index was significantly different ( $P < 0.05$ ) among different test

masks”

Study article: <https://pubmed.ncbi.nlm.nih.gov/31280156/>

## **3. Respiratory consequences of N95-type Mask usage in pregnant healthcare workers-a controlled clinical study**

The benefits of using N95 mask to prevent serious emerging infectious diseases should be weighed against potential respiratory consequences associated with extended N95 respirator usage.

“Study article: <https://pubmed.ncbi.nlm.nih.gov/26579222>

“It is known that the N95 mask, if worn for hours, can reduce blood oxygenation as much as 20 percent, which can lead to a loss of consciousness, as happened to the hapless fellow driving around alone in his car wearing an N95 mask, causing him to pass out, crash his car and sustain injuries. I am sure that we have several cases of elderly individuals or any person with poor lung function passing out, hitting their head. This, of course, can lead to death”

“CONCLUSIONS: Breathing through N95 mask materials have been shown to impede gaseous exchange and impose an additional workload on the metabolic system of pregnant healthcare workers, and this needs to be taken into consideration in guidelines for respirator use”

Yet we force pregnant women to use them...? What could this do to the fetus?

## **4. Headaches and the N95 face-mask amongst healthcare providers**

Face mask side effects include headaches.

These headaches can force you to use added or unnecessary medications like painkillers that carry their own side effects. The theory as to why masks can trigger headaches is the RESTRICTION OF OXYGEN.

What are the long-term health effects on Health Care Workers with headaches arising from impeded breathing?

Here are several sources and studies that back up this claim:

Study article: <https://pubmed.ncbi.nlm.nih.gov/16441251/>

Headaches Associated With Personal Protective Equipment – A Cross-Sectional Study Among Frontline Healthcare Workers During COVID-19

Study article: <https://pubmed.ncbi.nlm.nih.gov/32232837/>

How to Avoid Migraine Triggers While Wearing Your Mask

<https://www.withcove.com/learn/migraine-triggers-mask>

## **5. Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: a randomized controlled trial**

“Of the 8 symptoms recorded daily, subjects in the mask group were significantly more likely to experience headaches during the study period”

“Face mask use in health care workers has not been demonstrated to provide benefit in terms of cold symptoms or getting colds”

Study article: <https://pubmed.ncbi.nlm.nih.gov/19216002/>

## **6. Your Health Your Responsibility**

This video shows that even reading a book with a mask on decreases blood oxygen levels to your brain. what implications does this have for developing children forced to wear masks at school etc?

<https://youtu.be/ul5E5BUrII4>

## **7. Physiological impact of the N95 filtering facepiece respirator on healthcare workers**

“CONCLUSIONS: In healthy healthcare workers, FFR did not impose any important physiological burden during 1 hour of use, at realistic clinical work rates, but the FFR dead-space carbon dioxide and oxygen levels were significantly above and below, respectively, the ambient workplace standards, and elevated P(CO<sub>2</sub>) is a possibility”

Remember in “healthy healthcare workers” even their carbon dioxide levels rose. Most of the wider public have at least one health problem. Even healthy people were shown to have elevated CO2 levels above the healthy guidelines.

Study article: <https://pubmed.ncbi.nlm.nih.gov/20420727/>

## **8. The adverse skin reactions of health care workers using personal protective equipment for COVID-19**

Face mask side effects include adverse skin reactions

The adverse skin reactions of health care workers using personal protective equipment for COVID-19

Study article: <https://pubmed.ncbi.nlm.nih.gov/32541493/>

## **9. Your Mask May Be Causing Candida Growth in Your Mouth**

Face mask side effects include yeast infections

<https://www.everydayhealth.com/coronavirus/your-mask-may-be-causing-candida-growth-in-your-mouth/>

## **10. ‘Mask mouth’ is a seriously stinky side effect of wearing masks**

Face mask side effects include dental issues.

“We’re seeing inflammation in people’s gums that have been healthy forever, and cavities in people who have never had them before,” says Dr. Rob Ramondi, a dentist and co-founder of One ManhattanDental. “About 50 percent of our patients are being impacted by this, [so] we decided to name it ‘mask mouth’ — after ‘meth mouth.’ ”

“While mask mouth isn’t quite as obvious, if left untreated, the results could be equally harmful.

Gum disease — or periodontal disease — will eventually lead to strokes and an increased risk of heart attacks,”

says Dr. Marc Sclafani, another co-founder of One Manhattan Dental”

<https://nypost.com/2020/08/05/mask-mouth-is-a-seriously-stinky-side-effect-of-wearing-masks/>

## **11. All That Mask-Wearing Could Be Giving You (Gasp!) Mouth Fungus—Here’s How to Deal With it**

<https://www.wellandgood.com/mouth-sores-from-wearing-masks/>

## **12. ‘Maskne’ Is a Real Thing—Here’s How to Stop Face Mask Breakouts**

Face mask side effects include acne

<https://www.health.com/condition/skin-conditions/maskne-mask-acne-mechanica>

### **13. Improper use of medical masks can cause infections** Face mask side effects include mould and infections

Masks can cause bacterial and fungal infections around the mouth, and in the mouth and lungs EVEN if you wash the cloth mask. Mould colonies were found in masks in as little as one day.

<https://www.aa.com.tr/en/health/improper-use-of-medical-masks-can-cause-infections-/1766676>

### **14. Mould Colonization in Your Sinuses Could Be Holding You Back From Making a Full Recovery <**

Information on mould and how it can affect your health.

<https://moldfreeliving.com/2019/01/26/could-mold-colonization-in-your-sinuses/>

### **15. An investigation into the efficiency of disposable face masks**

What are the dangers of bacterial and fungal growths on a used and loaded mask?

This study tested all kinds of disposable masks and proved they cause you to breathe back in your own crap. Study article: <https://pubmed.ncbi.nlm.nih.gov/7440756/>

### **16. Can the Elastic of Surgical Face Masks Stimulate Ear Protrusion in Children?**

Disfiguration in children. Can masks stimulate ear protrusion in children?

This is due to masks that are too tightly fitted.

Tight masks can also cause tension headaches. Is this healthy for children long term?

Study article: <https://pubmed.ncbi.nlm.nih.gov/32556449/>

### **17. When You Wear A Face Mask Every Day, This Is What Happens To Your Lungs**

Mask use can trigger allergies due to the mask collecting particles that stay on you for long periods of time.

<https://www.thelist.com/214073/when-you-wear-a-face-mask-every-day-this-is-what-happens-to-your-lungs/>

### **18. The physiological impact of wearing an N95 mask during hemodialysis as a precaution against SARS in patients with end-stage renal disease**

The physiological impact of wearing an N95 mask during hemodialysis as a precaution against SARS in patients with end-stage renal disease.

And yet, we make sick people wear them. Even people without breathing issues, have lowered oxygen rates.

Study article: <https://pubmed.ncbi.nlm.nih.gov/15340662/>

## **19. Other Face Mask Side Effects and Health Implications to Consider**

There is a great potential for harm that may arise from public policies forcing mask use on the wider population.

The following unanswered questions arise unanswered:

- Can masks shed fibers or micro plastics that we can breathe in?
- Do these masks excrete chemical substances that are harmful when inhaled?
- Can masks excrete chemicals or fumes when heated, either with bodyheat sunlight or other sources of heat?
- Clothing dye can cause reactions, so how do we know that the manufacturing process of these masks do not pose a risk to us? Because, in reality, we do not buy our masks from medical companies or facilities who operate in sterile environments.

## **20. [Gaps in asepsis due to surgical caps, face masks, external surfaces of infusion bottles and sterile wrappers of disposable articles]**

“It is obvious that the surfaces of the boxes of sterile packed disposable instruments and infusion bottles are not sterile. The disposable surgical masks and surgical caps used for sterile clothing are delivered by the producers not sterile, either.” AND THIS IS HOSPITAL EQUIPMENT.

Study article: <https://pubmed.ncbi.nlm.nih.gov/6099666/>

## **21. Mask Production Video**

This is a “factory” that produces a lot of masks. Does this look like a sterile environment to you? This is what the majority of us are getting when we purchase online or in stores that sell them in bulk. Do you want that on your face?

<https://youtu.be/8gyO9TSIcOQ>

## **22. Allergies and the Immune System**

Can pathogen-laden droplets interact with environmental dust and aerosols captured on the mask? Can this elicit a greater reaction to viruses? For example, if you have a dust allergy your mask is collecting this thus causing inflammation to the wearer and lowering his or her immune system.

“This can cause wheezing, itching, runny nose, watery or itchy eyes, and other symptoms” would that not

facilitate spread and infection rate of viruses?

<https://www.hopkinsmedicine.org/health/conditions-and-diseases/allergies-and-the-immune-system>

### **23. Virus interactions with bacteria: Partners in the infectious dance**

Bacteria and viruses can interact an increase infection suseptability:

<https://journals.plos.org/plospathogens/article?id=10.1371/journal.ppat.1008234>

### **24. When viruses and bacteria unite!**

<https://blogs.scientificamerican.com/lab-rat/when-viruses-and-bacteria-unite/>

### **25. An empirical and theoretical investigation into the psychological effects of wearing a mask**

Face mask side effects include altered behaviour

Are there negative social consequences to a masked society? This study implies that, yes, masks do cause people to adopt altered behaviours based on mask use.

<https://strathprints.strath.ac.uk/43402/>

### **26. Mask mandates may affect a child's emotional, intellectual development**

Face mask side effects stagnate a child's natural intellectual development. It is well known that children find it hard to recognise faces up until a certain age. Mask use will further interfere with this. Is this healthy for a developing child?

<https://www.wishtv.com/news/mask-mandates-may-affect-a-childs-emotional-intellectual-development/>

### **27. Disabled People and Masks Contributing Toward Mental Health Issues**

Face mask side effects and mental health

What about disabled people? Deaf /people hard of hearing rely on mouth reading. What are the implications for them? What about people who suffer cognitive and behavioural disorders like autism? This could cause them HUGE distress. Not just from wearing a mask, but seeing others in masks (because let's face it – IT'S NOT NORMAL BEHAVIOUR).

Can masks cause anxiety, or make other mental health disorders worse?

Since masks CAN impede breathing, this can cause fainting and other bodily reaction that would otherwise be avoided if masks were not used. Here is a search engine link to prove that it is very common:

<https://duckduckgo.com/?q=mask+anxiety&ia=web>

## **28. Maine study looks into long-term psychological effects of wearing face masks coronavirus, COVID-19 pandemic**

This is a study on the psychological effects of masks.

<https://www.msn.com/en-us/health/wellness/umaine-study-looks-into-long-term-psychological-effects-of-wearing-face-masks-coronavirus-covid-19-pandemic/ar-BB13EfiU>

## **29. Masks: Have You Been Captured by This Psyop?**

Are there negative psychological consequences to wearing a mask, as a fear-based behavioral modification? This can easily trigger fear as a mask is reminding you there's a virus. The use of mask can also cause you to engage in risky behaviours due to a "false sense of security" because you feel protected.

<https://kellybroganmd.com/masks-have-you-been-captured-by-this-psyop/>

## **30. Masking the Truth – Face Masks, Empathy and Dis-inhibition**

<https://podtail.com/fi/podcast/conspiracy-theoryology/masking-the-truth-face-masks-empathy-and-dis-inhib/>

## **31. Covid-19 face masks: A potential source of microplastic fibers in the environment**

What are the environmental consequences of mask manufacturing and disposal?

Proof of increased littering due to increased mask use. a quick engine search will tell you, people are dumping them EVERYWHERE – into our rivers, into greenland areas etc. Plastics like nylon leach chemicals are going into our environment.

<https://pubmed.ncbi.nlm.nih.gov/32563114/>

## **32. Why Masks Don't Work Against COVID-19**

Can used and loaded masks become vectors of enhanced transmission for both the wearer and other people? (The evidence from studies suggest yes). Masks become useless after about 20 minutes due to the moisture in your breath. This moisture can become the droplets that viruses travel on. Can this not facilitate transmission?

Can masks become collectors and retainers of pathogens that otherwise, could be avoided when breathing without a mask? (The evidence suggests yes).

Can large droplets trapped via a mask become atomized or aerosolized into breathable components? Even down to the virion size. (The evidence suggests yes).

[https://www.citizensforfreespeech.org/why\\_masks\\_don\\_t\\_work\\_against\\_covid\\_19](https://www.citizensforfreespeech.org/why_masks_don_t_work_against_covid_19)

*LifeSiteNews has produced an extensive COVID-19 vaccines resources page. [View it here.](#)*

## RELATED:

*See LifeSite's extensive resources on masks:*

[Unmasking Masks](#): Insights into the issues and concerns surrounding COVID-19.

*And a two-part, July 2020 Special Report that reveals the full context and likely reasons behind the deadly masking phenomenon:*

[Explosion in mandatory masking isn't driven by science, but fear](#)

[Explosion in mandatory masking isn't driven by science, but fear – Part II](#)

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